



IN THE UNITED STATES PATENT AND TRADE MARK OFFICE

GP/3635\$
#11
6/14/01

In re application of: MEHO KARALIC)
Serial No.: 09/414,483)
Filed: 10/08/99)
For: BUILDING COMPONENTS)
AND METHOD OF)
MAKING SAME)
Docket No.: 247P1US)

Examiner: CHAVEZ, P
Art Unit: 3635

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TO 3600 MAIL ROOM

June 7, 2001

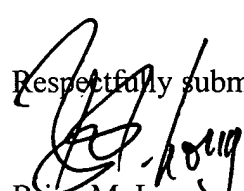
Commissioner of Patents and Trademarks
United States Patent and Trademark Office
Washington, D.C.
U.S.A. 20231

Dear Sir:

RESPONSE TO INFORMALITY RE PAYMENT OF FEE

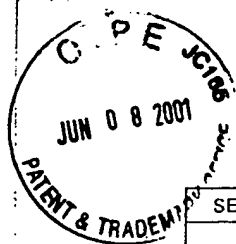
In reply to the INFORMALITY RE PAYMENT OF FEE, dated May 29, 2001, a copy of which is attached, please find enclosed herewith a check for \$9.00 in payment of the claim fee.

Respectfully submitted,


Brian M. Long
Reg. No. 28,815
LONG AND CAMERON
1401 - 1166 Alberni Street
Vancouver, B.C.
Canada V6E 3Z3
Tel: (604) 687-5513
Fax: (604) 687-5756

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M1906.247



**UNITED STATES DEPARTMENT OF COMMERCE
Patent and Trademark Office**

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SERIAL NUMBER	FILING DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NO.

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JUN 06 2001

LONG AND CAMERON

EXAMINER	
ART UNIT	PAPER NUMBER
	#10

DATE MAILED:

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INFORMALITY RE PAYMENT OF FEE

The informality regarding the payment of the fee in connection with ☐ the original filing fee ☐ the amendment filed 5/11/01 is indicated below.

A. FEE DUE

1. ☐ The amendment is considered incomplete in that the funds in Deposit Account No. _____ are insufficient to cover the entire fee due. The balance is due within the period set below.
2. ☐ The amendment is considered an incomplete response, in that payment of \$ _____ is insufficient to cover the claims as shown in the attached Patent Application Fee Determination Record. Remittance is due within the period set below.
3. ☒ The amendment has not been entered, since applicant has failed to remit (or authorize charge to a Deposit Account) the fee as indicated on the attached Patent Application Fee Determination Record. Remittance or authorization is due within the period set below.
4. ☐ The filing fee of \$ _____ submitted in this application is insufficient.
A balance of \$ _____ is due for additional claims.
5. ☒

APPLICANT IS GIVEN THE REMAINDER OF THE SET PERIOD FOR RESPONSE,
OR ONE (1) MONTH FROM THE DATE OF THIS LETTER, WHICHEVER IS LONGER,
WITHIN WHICH TO REMIT THE FEE OF \$ 9.00.

B. EXCESS PAYMENT:

5. ☐ It is noted that payment of \$ _____ is in excess of the amount necessary to cover the claims now in the application. See the attached Patent Application Fee Determination Record.

This matter of refund or credit to your account is being referred to the Finance Officer, for his consideration.

Philip Parris
CLERK OF GROUP

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 1994

Application or Docket Number

09/4/4483

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
OR	NUMBER FILED	NUMBER EXTRA
BASIC FEE		
TOTAL CLAIMS	14 minus 20 = *	—
DEPENDENT CLAIMS	3 minus 3 = *	—
MULTIPLE DEPENDENT CLAIM PRESENT		

If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
RATE	FEE		RATE	FEE
	365.00	OR		730.00
x\$11=		OR	x\$22=	
x38=		OR	x76=	
+120=		OR	+240=	
TOTAL		OR	TOTAL	

CLAIMS AS AMENDED - PART II

	(Column 1)		(Column 2)	(Column 3)
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	* 21	Minus	** 20	= 1
Independent	* 3	Minus	*** 3	= —
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
x\$11=		OR	x\$22=	
x38=		OR	x76=	
+120=		OR	+240=	
TOTAL ADDIT. FEE	9.00	OR	TOTAL ADDIT. FEE	

	(Column 1)		(Column 2)	(Column 3)
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus	**	=
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
x\$11=		OR	x\$22=	
x38=		OR	x76=	
+120=		OR	+240=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

	(Column 1)		(Column 2)	(Column 3)
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus	**	=
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
x\$11=		OR	x\$22=	
x38=		OR	x76=	
+120=		OR	+240=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

If the Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3."

The Highest Number Previously Paid For (Total or Independent) is the highest number found in the appropriate box in column 1.